



INSTITUTE OF MARITIME HISTORY
A TAX-EXEMPT EDUCATIONAL CORPORATION

Application for Membership

MAIL TO: I.M.H.
P.O. BOX 108
TALL TIMBERS, MD 20690

name (print): _____
last first middle or initial suffix

residence: _____
street address

city state ZIP

phone: _____
home cell

email: _____

diving: _____
highest certification level agency year total dives (approx.)

other skills: ☐ archaeology ☐ computers ☐ diving ☐ drafting ☐ medical / EMT
☐ photo / video ☐ research ☐ u/w search ☐ writing ☐ other (specify):

enclosed: **dues:** ☐ \$100 Annual, individual
☐ \$75 Student (with copy of current student ID)
☐ \$75 Senior (65+)
☐ \$50 Archeological Society of Virginia-Maritime Heritage Chapter member

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I hereby apply for membership in IMH and agree to abide by its policies and standards.

Date

Signature

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Please include a check payable to **Institute of Maritime History** for the amount of the membership due.
If paying a student membership, please also include a copy of a current valid student ID.